

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle)		2. DEPARTMENT, COMPONENT AND BRANCH		3. SOCIAL SECURITY NO. 	
4a. GRADE, RATE OR RANK	4b. PAY GRADE	5. DATE OF BIRTH (YYMMDD)	6. RESERVE OBLIG. TERM. DATE YEAR MONTH DATE		
7a. PLACE OF ENTRY INTO ACTIVE DUTY		7b. HOME OF RECORD AT TIME OF ENTRY (City and State, or complete address if known)			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND		8b. STATION WHERE SEPARATED			
9. COMMAND TO WHICH TRANSFERRED			10. SGLI COVERAGE <input type="checkbox"/> NONE AMOUNT: \$		
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years)		12. RECORD OF SERVICE	Year(s)	Month(s)	Day(s)
		a. Date Entered AD This Period			
		b. Separation Date This Period			
		c. Net Active Service This Period			
		d. Total Prior Active Service			
		e. Total Prior Inactive Service			
		f. Foreign Service			
		g. Sea Service			
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)					
14. MILITARY EDUCATION (Course title, number of weeks and months and year completed)					
15a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERAN'S EDUCATIONAL ASSISTANCE PROGRAM		YES	NO	15b. HIGH SCHOOL GRADUATE OR EQUIVALENT	
				YES	NO
16. DAYS ACCRUED LEAVE PAID					
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION				YES	NO
18. REMARKS					
19a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code)					
19b. NEAREST RELATIVE (Name and address - include Zip Code)					
20. MEMBER REQUESTS COPY 6 BE SENT TO _____ DIR. OF VET AFFAIRS			Yes		No
21. SIGNATURE OF MEMBER BEING SEPARATED		22. OFFICIAL AUTHORIZATION TO SIGN (Typed name, grade, title and signature)			

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION		23. CHARACTER OF SERVICE (Include upgrades)	
25. SEPARATION AUTHORITY		26. SEPARATION CODE	27. REENTRY CODE
28. NARRATIVE REASON FOR SEPARATION			
29. DATES OF TIME LOST DURING THIS PERIOD		30. MEMBER REQUESTS COPY 4 _____ INITIALS	